

Information to identify the case:

Debtor 1: Krystian Louise Swinton
First Name Middle Name Last Name

Social Security number or ITIN: xxx-xx-4251

EIN: _-_-

Debtor 2: _____
(Spouse, if filing) First Name Middle Name Last Name

Social Security number or ITIN: _-_-

EIN: _-_-

United States Bankruptcy Court: Western District of Missouri

Date case filed for chapter: 7 10/21/19

Case number: 19-42681-btf7

Official Form 309A (For Individuals or Joint Debtors)

Notice of Chapter 7 Bankruptcy Case -- No Proof of Claim Deadline

12/15

For the debtors listed above, a case has been filed under chapter 7 of the Bankruptcy Code. An order for relief has been entered.

This notice has important information about the case for creditors, debtors, and trustees, including information about the meeting of creditors and deadlines. Read both pages carefully.

The filing of the case imposed an automatic stay against most collection activities. This means that creditors generally may not take action to collect debts from the debtors or the debtors' property. For example, while the stay is in effect, creditors cannot sue, garnish wages, assert a deficiency, repossess property, or otherwise try to collect from the debtors. Creditors cannot demand repayment from debtors by mail, phone, or otherwise. Creditors who violate the stay can be required to pay actual and punitive damages and attorney's fees. Under certain circumstances, the stay may be limited to 30 days or not exist at all, although debtors can ask the court to extend or impose a stay.

The debtors are seeking a discharge. Creditors who assert that the debtors are not entitled to a discharge of any debts or who want to have a particular debt excepted from discharge may be required to file a complaint in the bankruptcy clerk's office within the deadlines specified in this notice. (See line 9 for more information.)

To protect your rights, consult an attorney. All documents filed in the case may be inspected at the bankruptcy clerk's office at the address listed below or through PACER (Public Access to Court Electronic Records at www.pacer.gov).

The staff of the bankruptcy clerk's office cannot give legal advice.

To help creditors correctly identify debtors, debtors submit full Social Security or Individual Taxpayer Identification Numbers, which may appear on a version of this notice. However, the full numbers must not appear on any document filed with the court.

Do not file this notice with any proof of claim or other filing in the case. Do not include more than the last four digits of a Social Security or Individual Taxpayer Identification Number in any document, including attachments, that you file with the court.

	About Debtor 1:	About Debtor 2:
1. Debtor's full name	Krystian Louise Swinton	
2. All other names used in the last 8 years		
3. Address	7718 Loma Vista Dr Kansas City, MO 64138	
4. Debtor's attorney Name and address	Tracy L. Robinson 818 Grand Blvd., Suite 505 Kansas City, MO 64106	Contact phone 816-842-1317 Email: admin@tlrlaw.com
5. Bankruptcy trustee Name and address	Janice E. Stanton 104 W. 9th Street - Suite 303 Kansas City, MO 64105	Contact phone 816-421-7770 Email: janice.stanton@sbcglobal.net

For more information, see page 2 >

Official Form 309A (For Individuals or Joint Debtors) Notice of Chapter 7 Bankruptcy Case -- No Proof of Claim Deadline

page 1

Debtor **Krystian Louise Swinton**Case number **19-42681-btf7**

6. Bankruptcy clerk's office Documents in this case may be filed at this address. You may inspect all records filed in this case at this office or online at www.pacer.gov .	U.S. Bankruptcy Court Charles Evans Whittaker Courthouse 400 East 9th Street, Room 1510 Kansas City, MO 64106	Hours open: 9:00 am – 4:30 pm Contact phone 816-512-1800 Date: 10/22/19
7. Meeting of creditors Debtors must attend the meeting to be questioned under oath. In a joint case, both spouses must attend. Creditors may attend, but are not required to do so.	November 26, 2019 at 09:00 AM The meeting may be continued or adjourned to a later date. If so, the date will be on the court docket.	Location: 400 East 9th Street,, Trustee Hearing Room 2110B, Kansas City, MO 64106
8. Presumption of abuse If the presumption of abuse arises, you may have the right to file a motion to dismiss the case under 11 U.S.C. § 707(b). Debtors may rebut the presumption by showing special circumstances.	The presumption of abuse does not arise.	
9. Deadlines The bankruptcy clerk's office must receive these documents and any required filing fee by the following deadlines.	File by the deadline to object to discharge or to challenge whether certain debts are dischargeable: Filing deadline: 1/27/20 You must file a complaint: <ul style="list-style-type: none"> • if you assert that the debtor is not entitled to receive a discharge of any debts under any of the subdivisions of 11 U.S.C. § 727(a)(2) through (7), or • if you want to have a debt excepted from discharge under 11 U.S.C § 523(a)(2), (4), or (6). You must file a motion: <ul style="list-style-type: none"> • if you assert that the discharge should be denied under § 727(a)(8) or (9). 	
	Deadline to object to exemptions: The law permits debtors to keep certain property as exempt. If you believe that the law does not authorize an exemption claimed, you may file an objection.	
10. Proof of claim Please do not file a proof of claim unless you receive a notice to do so.	No property appears to be available to pay creditors. Therefore, please do not file a proof of claim now. If it later appears that assets are available to pay creditors, the clerk will send you another notice telling you that you may file a proof of claim and stating the deadline.	
11. Creditors with a foreign address	If you are a creditor receiving a notice mailed to a foreign address, you may file a motion asking the court to extend the deadlines in this notice. Consult an attorney familiar with United States bankruptcy law if you have any questions about your rights in this case.	
12. Exempt property	The law allows debtors to keep certain property as exempt. Fully exempt property will not be sold and distributed to creditors. Debtors must file a list of property claimed as exempt. You may inspect that list at the bankruptcy clerk's office or online at www.pacer.gov . If you believe that the law does not authorize an exemption that the debtors claim, you may file an objection. The bankruptcy clerk's office must receive the objection by the deadline to object to exemptions in line 9.	

District/off: 0866-4

User: adkt
Form ID: 309A

Page 2 of 2
Total Noticed: 53

Date Rcvd: Oct 22, 2019

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center (continued)

16566673 +E-mail/Text: electronicbkydocs@nelnet.net Oct 22 2019 21:14:59 Nelnet, Acct No xxxxxx5787,
121 S 13th Street, Suite 201, Lincoln NE 68508-1911
16566674 E-mail/Text: electronicbkydocs@nelnet.net Oct 22 2019 21:14:59 Nelnet, Acct No xxxxxx5787,
3015 South Parker Road, Suite 400, Aurora CO 80014-2904
16566678 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/Old Navy, PO Box 965004, Orlando FL 32896-5004
16566680 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/Old Navy, PO Box 965005, Orlando FL 32896-5005
16566679 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/Old Navy, PO Box 965036, Orlando FL 32896-5036
16566681 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/QCard, Acct No xxxx xxxx xxxx 7898,
PO Box 965017, Orlando FL 32896-5017
16566682 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/QCard, Acct No xxxx xxxx xxxx 7898,
PO Box 965018, Orlando FL 32896-5018
16566685 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/Walmart, Acct No xxxx xxxx xxxx 1053,
PO Box 965022, Orlando FL 32896-5022
16566683 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/Walmart, Acct No xxxx xxxx xxxx 1053,
PO Box 965024, Orlando FL 32896-5024
16566684 EDI: RMSC.COM Oct 23 2019 01:13:00 SYNCRB/Walmart, Acct No xxxx xxxx xxxx 1053,
PO Box 965036, Orlando FL 32896-5036
16566687 +EDI: RMSC.COM Oct 23 2019 01:13:00 Synchrony Bank/Old Navy, 4125 Windward Plaza Drive,
Alpharetta GA 30005-8738
16566686 EDI: RMSC.COM Oct 23 2019 01:13:00 Synchrony Bank/Old Navy, Attn: Bankruptcy Department,
PO Box 965060, Orlando FL 32896-5060
16566688 +EDI: RMSC.COM Oct 23 2019 01:13:00 Synchrony Bank/Q Card, Acct No xxxx xxxx xxxx 7898,
4125 Windward Plaza Drive, Alpharetta GA 30005-8738
16566689 EDI: RMSC.COM Oct 23 2019 01:13:00 Synchrony Bank/QCard, Acct No xxxx xxxx xxxx 7898,
Attn: Bankruptcy Department, PO Box 965060, Orlando FL 32896-5060
16566691 +EDI: RMSC.COM Oct 23 2019 01:13:00 Synchrony Bank/Walmart, Acct No xxxx xxxx xxxx 1053,
4125 Windward Plaza Drive, Alpharetta GA 30005-8738
16566690 EDI: RMSC.COM Oct 23 2019 01:13:00 Synchrony Bank/Walmart, Acct No xxxx xxxx xxxx 1053,
Attn: Bankruptcy Department, PO Box 965060, Orlando FL 32896-5060

TOTAL: 38

***** BYPASSED RECIPIENTS *****

NONE.

TOTAL: 0

Addresses marked '+' were corrected by inserting the ZIP or replacing an incorrect ZIP.
USPS regulations require that automation-compatible mail display the correct ZIP.

Transmission times for electronic delivery are Eastern Time zone.

Addresses marked '++' were redirected to the recipient's preferred mailing address
pursuant to 11 U.S.C. 342(f)/Fed.R.Bank.PR.2002(g)(4).

I, Joseph Speetjens, declare under the penalty of perjury that I have sent the attached document to the above listed entities in the manner shown, and prepared the Certificate of Notice and that it is true and correct to the best of my information and belief.

Meeting of Creditor Notices only (Official Form 309): Pursuant to Fed. R. Bank. P. 2002(a)(1), a notice containing the complete Social Security Number (SSN) of the debtor(s) was furnished to all parties listed. This official court copy contains the redacted SSN as required by the bankruptcy rules and the Judiciary's privacy policies.

Date: Oct 24, 2019

Signature: /s/Joseph Speetjens

CM/ECF NOTICE OF ELECTRONIC FILING

The following persons/entities were sent notice through the court's CM/ECF electronic mail (Email) system on October 22, 2019 at the address(es) listed below:

NONE.

TOTAL: 0

Imaged Certificate of Notice Page 3 of 4

United States Bankruptcy Court
Western District of MissouriIn re:
Krystian Louise Swinton
DebtorCase No. 19-42681-btf
Chapter 7

CERTIFICATE OF NOTICE

District/off: 0866-4

User: adkt
Form ID: 309APage 1 of 2
Total Noticed: 53

Date Rcvd: Oct 22, 2019

Notice by first class mail was sent to the following persons/entities by the Bankruptcy Noticing Center on Oct 24, 2019.

db
16566648 +Krystian Louise Swinton, 7718 Loma Vista Dr, Kansas City, MO 64138-4005
+Abbott, Osborn, Van Vliet, PLC, Acct No xx6838, 974 - 73rd Street, Suite 20,
Des Moines IA 50265-1026

16566659 +CarMax Auto Finance, Acct No xxxx0414, 12800 Tuckahoe Creek Parkway,
Richmond VA 23238-1115

16566658 +CarMax Auto Finance, Acct No xxxx0414, 225 Chastain Meadows Court, Kennesaw GA 30144-5897
16566657 CarMax Auto Finance, Acct No xxxx0414, PO Box 440609, Kennesaw GA 30160-9511
16566660 Client Services, Inc., Acct No xxxx8010, 3451 Harry S Truman Boulevard,
Saint Charles MO 63301-4047

16566664 Dept of Education - OGC, Acct No xxxxxx5787, Division of Post Secondary Education,
400 Maryland Avenue SW, Room 6E353, Washington DC 20202-2110

16566669 ++MCNEILEPAPPAS PC, 7500 W 110TH ST, SUITE 110, OVERLAND PARK KS 66210-2476
(address filed with court: McNeilePappas, PC, Acct No xxxx xxxx xxxx 4051,
14701 E 42nd Street, Suite 200, Independence MO 64055-0000)

16566672 +Midland Funding, LLC, Acct No xxxxxx4653, 320 East Big Beaver, Troy MI 48083-1271
16566677 +Recovery Management Service, Acct No xxxx3642, 4200 Cantera Drive, Suite 211,
Warrenville IL 60555-3040

16566692 +US Attorney Western District of Missouri, Acct No xxxxxx5787,
Attn Bankruptcy Processing Clerk, Charles Evans Whittaker Courthouse,
400 East 9th Street, Room 5510, Kansas City MO 64106-2637

16566693 US Department of Education, Acct No xxxxxx5787, Office of the Secretary,
Room 4181 Fed Office Bldg 6, 400 Maryland Ave SW, Washington DC 20202-0100

16566695 +US Department of Education, Acct No xxxxxx5787, 3130 Fairview Park Drive, Suite 800,
Falls Church VA 22042-4566

16566696 +US Department of Education, Acct No xxxxxx5787, 2505 S Finley Road, Lombard IL 60148-4867
16566694 US Department of Education, Acct No xxxxxx5787, PO Box 5227, Greenville TX 75403-5227

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center.
aty E-mail/Text: admin@tlrlaw.com Oct 22 2019 21:14:48 Tracy L. Robinson,

818 Grand Blvd., Suite 505, Kansas City, MO 64106

tr +EDI: QJESTANTON.COM Oct 23 2019 01:13:00 Janice E. Stanton, 104 W. 9th Street - Suite 303,
Kansas City, MO 64105-1718

smg E-mail/Text: ecfnofices@dor.mo.gov Oct 22 2019 21:14:52 Missouri Department of Revenue,
General Counsel's Office, PO Box 475, Jefferson City, MO 65105-0475

16566656 EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One Bank USA NA,
Acct No xxxx xxxx xxxx 5592, 15000 Capital One Drive, Richmond VA 23238-0000

16566654 EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One Bank USA NA, Acct No xxxxxx4653,
PO Box 85015, Richmond VA 23285-5075

16566651 +EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One, Acct No xxxxxx4653, PO Box 30281,
Salt Lake City UT 84130-0281

16566652 +EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One, Acct No xxxx xxxx xxxx 5592,
PO Box 30281, Salt Lake City UT 84130-0281

16566650 EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One, Acct No xxxx xxxx xxxx 0425,
Inquiries/Bankruptcy Department, PO Box 30285, Salt Lake City UT 84130-0285

16566649 EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One, Acct No xxxx xxxx xxxx 5592,
Inquiries/Bankruptcy Department, PO Box 30285, Salt Lake City UT 84130-0285

16566655 +EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One Bank USA NA,
Acct No xxxx xxxx xxxx 5592, 10700 Capital One Way, Richmond VA 23060-9243

16566653 +EDI: CAPITALONE.COM Oct 23 2019 01:13:00 Capital One Bank USA NA, Acct No xxxxxx4653,
10700 Capital One Way, Richmond VA 23060-9243

16566661 EDI: WFNNB.COM Oct 23 2019 01:13:00 Comenity Bank/Victoria's Secret,
Acct No *****-7987, PO Box 182789, Columbus OH 43218-2789

16566662 EDI: WFNNB.COM Oct 23 2019 01:13:00 Comenity Bank/Victoria's Secret,
Acct No *****-7987, Bankruptcy Department, PO Box 182125,
Columbus OH 43218-2125

16566663 EDI: WFNNB.COM Oct 23 2019 01:13:00 Comenity Bank/Victoria's Secret,
Acct No *****-7987, Customer Service, PO Box 182273, Columbus OH 43218-2273

16566666 EDI: DISCOVER.COM Oct 23 2019 01:13:00 Discover Card, Acct No xxxx xxxx xxxx 4051,
PO Box 15316, Wilmington DE 19850-5316

16566665 EDI: DISCOVER.COM Oct 23 2019 01:13:00 Discover Card, Acct No xxxx xxxx xxxx 4051,
PO Box 30395, Salt Lake City UT 84130-0395

16566667 +EDI: FSAE.COM Oct 23 2019 01:13:00 First Source Advantage, LLC, Acct No xxxx7216,
205 Bryant Woods South, Buffalo NY 14228-3609

16566668 E-mail/Text: ben.meyer@gu.edu Oct 22 2019 21:14:51 Grand Canyon University,
Acct No xxxx3642, 3300 W Camelback Road, Phoenix AZ 85017-0000

16566670 +EDI: MID8.COM Oct 23 2019 01:13:00 Midland Credit Management, Inc, Acct No xxxxxx4653,
2365 Northside Drive, Suite 300, San Diego CA 92108-2709

16566671 +EDI: MID8.COM Oct 23 2019 01:13:00 Midland Funding, LLC, Acct No xxxxxx4653,
2365 Northside Drive, Suite 300, San Diego CA 92108-2709

16566675 +E-mail/Text: electronicbkydocs@nelnet.net Oct 22 2019 21:14:59 Nelnet, Acct No xxxxxx5787,
PO Box 82505, Lincoln NE 68501-2505

16566676 E-mail/Text: electronicbkydocs@nelnet.net Oct 22 2019 21:14:59 Nelnet, Acct No xxxxxx5787,
PO Box 82561, Lincoln NE 68501-2561

Debtor 1 Krystian Louise Swinton

Case number (if known) _____

4.5	Midland Funding, LLC Nonpriority Creditor's Name 2365 Northside Drive Suite 300 San Diego, CA 92108 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4653</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>1916-CV15673</u>	<u>\$1,910.87</u>
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4.6	Nelnet Nonpriority Creditor's Name 121 S 13th Street Suite 201 Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5787</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	<u>\$62,855.88</u>
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4.7	Synchrony Bank/Old Navy Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	<u>Unknown</u>
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Debtor 1 Krystian Louise Swinton

Case number (if known) _____

4.8 Synchrony Bank/QCard Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7898</u> \$961.52 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
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4.9 Synchrony Bank/Walmart Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1053</u> \$571.63 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
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Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Abbott, Osborn, Van Vliet, PLC 974 - 73rd Street Suite 20 Des Moines, IA 50324	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
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Last 4 digits of account number	<u>6838</u>
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Name and Address Capital One Inquiries/Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
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Last 4 digits of account number	<u>0425</u>
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Name and Address Capital One PO Box 30281 Salt Lake City, UT 84130	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
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Last 4 digits of account number	
---------------------------------	--

Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
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Debtor 1 Krystian Louise Swinton

Case number (if known) _____

14701 E 42nd Street
Suite 200
Independence, MO 64055

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Midland Credit Management, Inc
2365 Northside Drive
Suite 300
San Diego, CA 92108

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.5 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 4653

Name and Address
Midland Funding, LLC
320 East Big Beaver
Troy, MI 48083

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.5 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Nelnet
3015 South Parker Road
Suite 400
Aurora, CO 80014-2904

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Nelnet
PO Box 82561
Lincoln, NE 68501-2561

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Nelnet
PO Box 82505
Lincoln, NE 68501

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Recovery Management Service
4200 Cantera Drive
Suite 211
Warrenville, IL 60555-0857

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.4 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Old Navy
PO Box 965004
Orlando, FL 32896-5004

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.7 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Old Navy
PO Box 965005
Orlando, FL 32896-5005

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.7 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Old Navy
PO Box 965036
Orlando, FL 32896-5036

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.7 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/QCard
PO Box 965017
Orlando, FL 32896-5017

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.8 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/QCard

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.8 of (Check one):

- ☐ Part 1: Creditors with Priority Unsecured Claims

Debtor 1 Krystian Louise Swinton

Case number (if known) _____

PO Box 965018
Orlando, FL 32896-5018

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Walmart
PO Box 965024
Orlando, FL 32896-5024

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.9 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Walmart
PO Box 965022
Orlando, FL 32896-5022

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.9 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
SYNCB/Walmart
PO Box 965036
Orlando, FL 32896-5036

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.9 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Synchrony Bank/Old Navy
4125 Windward Plaza Drive
Alpharetta, GA 30005

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.7 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Synchrony Bank/Q Card
4125 Windward Plaza Drive
Alpharetta, GA 30005

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.8 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
Synchrony Bank/Walmart
4125 Windward Plaza Drive
Alpharetta, GA 30005

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.9 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
US Attorney Western District of
Missouri
Attn: Bankruptcy Processing Clerk
Charles Evans Wittaker Courthouse
400 East 9th Street, Room 5510
Kansas City, MO 64106

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
US Department of Education
Office of the Secretary
Room 4181 Fed Office Bldg 6
400 Maryland Ave SW
Washington, DC 20202-0100

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
US Department of Education
2505 S Finley Road
Lombard, IL 60148-4899

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name and Address
US Department of Education
3130 Fairview Park Drive
Suite 800
Falls Church, VA 22323

On which entry in Part 1 or Part 2 did you list the original creditor?
Line 4.6 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

B18 (Official Form 18) (12/07)

United States Bankruptcy Court

Western District of Missouri

Case No. 19-42681-btf7

Chapter 7

In re Debtor(s) (name(s) used by the debtor(s) in the last 8 years, including married, maiden, trade, and address):

Krystian Louise Swinton
7718 Loma Vista Dr
Kansas City, MO 64138

Social Security / Individual Taxpayer ID No.:

xxx-xx-4251

Employer Tax ID / Other nos.:

DISCHARGE OF DEBTOR

It appearing that the debtor is entitled to a discharge,

IT IS ORDERED:

The debtor is granted a discharge under section 727 of title 11, United States Code, (the Bankruptcy Code).

BY THE COURT

Dated: 1/29/20

Brian T. Fenimore
United States Bankruptcy Judge

SEE THE BACK OF THIS ORDER FOR IMPORTANT INFORMATION.

**EXPLANATION OF BANKRUPTCY DISCHARGE
IN A CHAPTER 7 CASE**

This court order grants a discharge to the person named as the debtor. It is not a dismissal of the case and it does not determine how much money, if any, the trustee will pay to creditors.

Collection of Discharged Debts Prohibited

The discharge prohibits any attempt to collect from the debtor a debt that has been discharged. For example, a creditor is not permitted to contact a debtor by mail, phone, or otherwise, to file or continue a lawsuit, to attach wages or other property, or to take any other action to collect a discharged debt from the debtor. *[In a case involving community property:* There are also special rules that protect certain community property owned by the debtor's spouse, even if that spouse did not file a bankruptcy case.] A creditor who violates this order can be required to pay damages and attorney's fees to the debtor.

However, a creditor may have the right to enforce a valid lien, such as a mortgage or security interest, against the debtor's property after the bankruptcy, if that lien was not avoided or eliminated in the bankruptcy case. Also, a debtor may voluntarily pay any debt that has been discharged.

Debts That are Discharged

The chapter 7 discharge order eliminates a debtor's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different chapter of the Bankruptcy Code and converted to chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts That are Not Discharged

Some of the common types of debts which are not discharged in a chapter 7 bankruptcy case are:

- a. Debts for most taxes;
- b. Debts incurred to pay nondischargeable taxes;
- c. Debts that are domestic support obligations;
- d. Debts for most student loans;
- e. Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- f. Debts for personal injuries or death caused by the debtor's operation of a motor vehicle, vessel, or aircraft while intoxicated;
- g. Some debts which were not properly listed by the debtor;
- h. Debts that the bankruptcy court specifically has decided or will decide in this bankruptcy case are not discharged;
- i. Debts for which the debtor has given up the discharge protections by signing a reaffirmation agreement in compliance with the Bankruptcy Code requirements for reaffirmation of debts; and
- j. Debts owed to certain pension, profit sharing, stock bonus, other retirement plans, or to the Thrift Savings Plan for federal employees for certain types of loans from these plans.

This information is only a general summary of the bankruptcy discharge. There are exceptions to these general rules. Because the law is complicated, you may want to consult an attorney to determine the exact effect of the discharge in this case.

Imaged Certificate of Notice Page 3 of 4

United States Bankruptcy Court
Western District of MissouriIn re:
Krystian Louise Swinton
DebtorCase No. 19-42681-btf
Chapter 7

CERTIFICATE OF NOTICE

District/off: 0866-4

User: admin
Form ID: b18Page 1 of 2
Total Noticed: 53

Date Rcvd: Jan 29, 2020

Notice by first class mail was sent to the following persons/entities by the Bankruptcy Noticing Center on Jan 31, 2020.

db
16566648 +Krystian Louise Swinton, 7718 Loma Vista Dr, Kansas City, MO 64138-4005
+Abbott, Osborn, Van Vliet, PLC, Acct No xx6838, 974 - 73rd Street, Suite 20,
Des Moines IA 50265-1026
16566659 +CarMax Auto Finance, Acct No xxxxx0414, 12800 Tuckahoe Creek Parkway,
Richmond VA 23238-1115
16566658 +CarMax Auto Finance, Acct No xxxxx0414, 225 Chastain Meadows Court, Kennesaw GA 30144-5897
16566657 CarMax Auto Finance, Acct No xxxxx0414, PO Box 440609, Kennesaw GA 30160-9511
16566664 Dept of Education - OGC, Acct No xxxxxxx5787, Division of Post Secondary Education,
400 Maryland Avenue SW, Room 6E353, Washington DC 20202-2110
16566669 ++MCNEILEPAPPAS PC, 7500 W 110TH ST, SUITE 110, OVERLAND PARK KS 66210-2476
(address filed with court: McNeilePappas, PC, Acct No xxxxx xxxx xxxx 4051,
14701 E 42nd Street, Suite 200, Independence MO 64055-0000)
16566672 +Midland Funding, LLC, Acct No xxxxxxx4653, 320 East Big Beaver, Troy MI 48083-1271
16566677 +Recovery Management Service, Acct No xxxxx3642, 4200 Cantera Drive, Suite 211,
Warrenville IL 60555-3040
16566692 +US Attorney Western District of Missouri, Acct No xxxxxxx5787,
Attn Bankruptcy Processing Clerk, Charles Evans Wiittaker Courthouse,
400 East 9th Street, Room 5510, Kansas City MO 64106-2637
16566693 US Department of Education, Acct No xxxxxxx5787, Office of the Secretary,
Room 4181 Fed Office Bldg 6, 400 Maryland Ave SW, Washington DC 20202-0100
16566695 +US Department of Education, Acct No xxxxxxx5787, 3130 Fairview Park Drive, Suite 800,
Falls Church VA 22042-4566
16566696 +US Department of Education, Acct No xxxxxxx5787, 2505 S Finley Road, Lombard IL 60148-4867
16566694 US Department of Education, Acct No xxxxxxx5787, PO Box 5227, Greenville TX 75403-5227

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center.

tr +EDI: QJESTANTON.COM Jan 30 2020 02:58:00 Janice E. Stanton, 104 W. 9th Street - Suite 303,
Kansas City, MO 64105-1718
smg E-mail/Text: ecfnofices@dor.mo.gov Jan 29 2020 21:57:20 Missouri Department of Revenue,
General Counsel's Office, PO Box 475, Jefferson City, MO 65105-0475
16566656 EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One Bank USA NA,
Acct No xxxxx xxxx 5592, 15000 Capital One Drive, Richmond VA 23238-0000
16566654 EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One Bank USA NA, Acct No xxxxxxx4653,
PO Box 85015, Richmond VA 23285-5075
16566651 +EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One, Acct No xxxxxxx4653, PO Box 30281,
Salt Lake City UT 84130-0281
16566652 +EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One, Acct No xxxxx xxxx xxxx 5592,
PO Box 30281, Salt Lake City UT 84130-0281
16566650 EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One, Acct No xxxxx xxxx xxxx 0425,
Inquiries/Bankruptcy Department, PO Box 30285, Salt Lake City UT 84130-0285
16566649 EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One, Acct No xxxxx xxxx xxxx 5592,
Inquiries/Bankruptcy Department, PO Box 30285, Salt Lake City UT 84130-0285
16566655 +EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One Bank USA NA,
Acct No xxxxx xxxx 5592, 10700 Capital One Way, Richmond VA 23060-9243
16566653 +EDI: CAPITALONE.COM Jan 30 2020 02:58:00 Capital One Bank USA NA, Acct No xxxxxxx4653,
10700 Capital One Way, Richmond VA 23060-9243
16566660 E-mail/Text: mediamanagers@clientservices.com Jan 29 2020 21:57:19 Client Services, Inc.,
Acct No xxxxx8010, 3451 Harry S Truman Boulevard, Saint Charles MO 63301-4047
16566661 EDI: WFNBNB.COM Jan 30 2020 02:58:00 Comenity Bank/Victoria's Secret,
Acct No *****-7987, PO Box 182789, Columbus OH 43218-2789
16566662 EDI: WFNBNB.COM Jan 30 2020 02:58:00 Comenity Bank/Victoria's Secret,
Acct No *****-7987, Bankruptcy Department, PO Box 182125,
Columbus OH 43218-2125
16566663 EDI: WFNBNB.COM Jan 30 2020 02:58:00 Comenity Bank/Victoria's Secret,
Acct No *****-7987, Customer Service, PO Box 182273, Columbus OH 43218-2273
16566666 EDI: DISCOVER.COM Jan 30 2020 02:58:00 Discover Card, Acct No xxxxx xxxx xxxx 4051,
PO Box 15316, Wilmington DE 19850-5316
16566665 EDI: DISCOVER.COM Jan 30 2020 02:58:00 Discover Card, Acct No xxxxx xxxx xxxx 4051,
PO Box 30395, Salt Lake City UT 84130-0395
16566667 +EDI: FSAE.COM Jan 30 2020 02:58:00 First Source Advantage, LLC, Acct No xxxxx7216,
205 Bryant Woods South, Buffalo NY 14228-3609
16566668 E-mail/Text: ben.meyer@gcu.edu Jan 29 2020 21:57:17 Grand Canyon University,
Acct No xxxxx3642, 3300 W Camelback Road, Phoenix AZ 85017-0000
16566670 +EDI: MID8.COM Jan 30 2020 02:58:00 Midland Credit Management, Inc, Acct No xxxxxxx4653,
2365 Northside Drive, Suite 300, San Diego CA 92108-2709
16566671 +EDI: MID8.COM Jan 30 2020 02:58:00 Midland Funding, LLC, Acct No xxxxxxx4653,
2365 Northside Drive, Suite 300, San Diego CA 92108-2709
16566675 +E-mail/Text: electronicbkydocs@nelnet.net Jan 29 2020 21:57:32 Nelnet, Acct No xxxxxxx5787,
PO Box 82505, Lincoln NE 68501-2505
16566676 E-mail/Text: electronicbkydocs@nelnet.net Jan 29 2020 21:57:32 Nelnet, Acct No xxxxxxx5787,
PO Box 82561, Lincoln NE 68501-2561
16566673 +E-mail/Text: electronicbkydocs@nelnet.net Jan 29 2020 21:57:32 Nelnet, Acct No xxxxxxx5787,
121 S 13th Street, Suite 201, Lincoln NE 68508-1911
16566674 E-mail/Text: electronicbkydocs@nelnet.net Jan 29 2020 21:57:32 Nelnet, Acct No xxxxxxx5787,
3015 South Parker Road, Suite 400, Aurora CO 80014-2904

District/off: 0866-4

User: admin
Form ID: b18

Page 2 of 2
Total Noticed: 53

Date Rcvd: Jan 29, 2020

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center (continued)

16567158 +EDI: PRA.COM Jan 30 2020 02:58:00 PRA Receivables Management, LLC, PO Box 41021, Norfolk, VA 23541-1021
16566678 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/Old Navy, PO Box 965004, Orlando FL 32896-5004
16566680 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/Old Navy, PO Box 965005, Orlando FL 32896-5005
16566679 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/Old Navy, PO Box 965036, Orlando FL 32896-5036
16566681 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/QCard, Acct No xxxx xxxx xxxx 7898, PO Box 965017, Orlando FL 32896-5017
16566682 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/QCard, Acct No xxxx xxxx xxxx 7898, PO Box 965018, Orlando FL 32896-5018
16566685 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/Walmart, Acct No xxxx xxxx xxxx 1053, PO Box 965022, Orlando FL 32896-5022
16566683 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/Walmart, Acct No xxxx xxxx xxxx 1053, PO Box 965024, Orlando FL 32896-5024
16566684 EDI: RMSC.COM Jan 30 2020 02:58:00 SYNCR/Walmart, Acct No xxxx xxxx xxxx 1053, PO Box 965036, Orlando FL 32896-5036
16566687 +EDI: RMSC.COM Jan 30 2020 02:58:00 Synchrony Bank/Old Navy, 4125 Windward Plaza Drive, Alpharetta GA 30005-8738
16566686 EDI: RMSC.COM Jan 30 2020 02:58:00 Synchrony Bank/Old Navy, Attn: Bankruptcy Department, PO Box 965060, Orlando FL 32896-5060
16566688 +EDI: RMSC.COM Jan 30 2020 02:58:00 Synchrony Bank/Q Card, Acct No xxxx xxxx xxxx 7898, 4125 Windward Plaza Drive, Alpharetta GA 30005-8738
16566689 EDI: RMSC.COM Jan 30 2020 02:58:00 Synchrony Bank/QCard, Acct No xxxx xxxx xxxx 7898, Attn: Bankruptcy Department, PO Box 965060, Orlando FL 32896-5060
16566691 +EDI: RMSC.COM Jan 30 2020 02:58:00 Synchrony Bank/Walmart, Acct No xxxx xxxx xxxx 1053, 4125 Windward Plaza Drive, Alpharetta GA 30005-8738
16566690 EDI: RMSC.COM Jan 30 2020 02:58:00 Synchrony Bank/Walmart, Acct No xxxx xxxx xxxx 1053, Attn: Bankruptcy Department, PO Box 965060, Orlando FL 32896-5060

TOTAL: 39

***** BYPASSED RECIPIENTS (undeliverable, * duplicate) *****

cr* +PRA Receivables Management, LLC, PO Box 41021, Norfolk, VA 23541-1021

TOTALS: 0, * 1, ## 0

Addresses marked '+' were corrected by inserting the ZIP or replacing an incorrect ZIP. USPS regulations require that automation-compatible mail display the correct ZIP.

Transmission times for electronic delivery are Eastern Time zone.

Addresses marked '+' were redirected to the recipient's preferred mailing address pursuant to 11 U.S.C. 342(f)/Fed.R.Bank.PR.2002(g)(4).

I, Joseph Speetjens, declare under the penalty of perjury that I have sent the attached document to the above listed entities in the manner shown, and prepared the Certificate of Notice and that it is true and correct to the best of my information and belief.

Meeting of Creditor Notices only (Official Form 309): Pursuant to Fed. R. Bank. P. 2002(a)(1), a notice containing the complete Social Security Number (SSN) of the debtor(s) was furnished to all parties listed. This official court copy contains the redacted SSN as required by the bankruptcy rules and the Judiciary's privacy policies.

Date: Jan 31, 2020

Signature: /s/Joseph Speetjens

CM/ECF NOTICE OF ELECTRONIC FILING

The following persons/entities were sent notice through the court's CM/ECF electronic mail (Email) system on January 29, 2020 at the address(es) listed below:

Janice E. Stanton jstanton@sr-lawfirm.com,
jmarcus@sr-lawfirm.com;mol3@ecfcbis.com;jstanton@ecf.axosfs.com
Tracy L. Robinson on behalf of Debtor 1 Krystian Louise Swinton
tlrcourtmail@gmail.com;RobinsonTR52047@notify.bestcase.com

TOTAL: 2

2.7 SYNCB/OLD NAVY (CLOSED)

Summary

Your debt-to-credit ratio represents the amount of credit you're using and generally makes up a percentage of your credit score. It's calculated by dividing an account's reported balance by its credit limit.

Account Number	Reported Balance		\$0
Account Status	OVER_120_DAYS_PAST_DUE	Debt-to-Credit Ratio	0%
Available Credit	\$200		

Account History

The tables below show up to 2 years of the monthly balance, available credit, scheduled payment, date of last payment, high credit, credit limit, amount past due, activity designator, and comments.

Balance

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018				\$411								
2019												
2020												

Available Credit

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018												
2019												
2020												

Scheduled Payment

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018				\$51								
2019												
2020												

Actual Payment

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

EQUIFAX

KRYSTIAN SWINTON | May 29, 2020

Page 19 of 81

Summary > Revolving > Mortgage > Installment > Other > Statements > Personal Info > Inquiries > Public Records > Collections

2018 \$35

2019

2020

High Credit

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

2018 \$411

2019

2020

Credit Limit

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

2018 \$200

2019

2020

Amount Past Due

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

2018 \$254

2019

2020

Activity Designator

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
------	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

2018 C

2019

2020

Comments 1

Date	Comment
------	---------

04/2018 Account closed by credit grantor

Comments 2

EQUIFAX

KRYSTIAN SWINTON | May 29, 2020

Page 20 of 81

Summary	Revolving	Mortgage	Installment	Other	Statements	Personal Info	Inquiries	Public Records	Collections
---------	-----------	----------	-------------	-------	------------	---------------	-----------	----------------	-------------

Date	Comment
04/2018	150 days past due

Payment History

View up to 7 years of monthly payment history on this account. The numbers indicated in each month represent the number of days a payment was past due; the letters indicate other account events, such as bankruptcy or collections.

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
2018	90	120	150	120	150	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX	XXXX
2017	XXXX	XXXX	XXXX	XXXX	✓	✓	✓	✓	✓	✓	30	60
✓ Paid on Time	30	30 Days Past Due		60	60 Days Past Due		90	90 Days Past Due		120	120 Days Past Due	
150 150 Days Past Due	180	180 Days Past Due		V	Voluntary Surrender		F	Foreclosure		C	Collection Account	
CO Charge-Off	B	Included in Bankruptcy		R	Repossession		TN	Too New to Rate		XXXX	No Data Available	

Account Details

View detailed information about this account. Contact the creditor or lender if you have any questions about it.

High Credit	\$422	Owner	INDIVIDUAL
Credit Limit	\$200	Account Type	REVOLVING
Terms Frequency	MONTHLY	Term Duration	0
Balance	\$0	Date Opened	May 07, 2017
Amount Past Due		Date Reported	Jun 17, 2018
Actual Payment Amount		Date of Last Payment	May 01, 2018
Date of Last Activity		Scheduled Payment Amount	
Months Reviewed	13	Delinquency First Reported	
Activity Designator	PAID_AND_CLOSED	Creditor Classification	UNKNOWN
Deferred Payment Start Date		Charge Off Amount	
Balloon Payment Date		Balloon Payment Amount	
Loan Type	Charge Account	Date Closed	Dec 01, 2017
Date of First Delinquency	Oct 01, 2017		

EQUIFAX

KRYSTIAN SWINTON | May 29, 2020

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Summary > Revolving > Mortgage > Installment > Other > Statements > Personal Info > Inquiries > Public Records > Collections

Comments

Account paid for less than full balance

Contact

SYNCB/OLD NAVY
4125 WINDWARD PLAZA
ALPHARETTA, GA 30005

SYNCB/OLD NAVY
601859XXXXXX

Closed

ACCOUNT DETAILS

Account Name	SYNCB/OLD NAVY
Account #	601859XXXXXX
Original Creditor	-
Company Sold	-
Account Type	REVOLVING
Date Opened	May 07, 2017
Account Status	Closed
Payment Status	Legally paid in full for less than the full balance
Status Updated	Jun 01, 2018
Balance	-
Balance Updated	Jun 17, 2018
Credit Limit	\$200
Monthly Payment	-
Past Due Amount	-
Highest Balance	\$422
Terms	Revolving
Responsibility	Individual
Your Statement	-
Comments	Election of remedy - reported by subscriber Account legally paid in full for less than the full balance

CREDIT USAGE



Unknown Credit Usage
Credit usage could not be calculated for this account because either the balance and/or credit limit were not reported.

CONTACT INFORMATION

PO BOX 965005
ORLANDO, FL 32896
(877) 222-6868

PAYMENT HISTORY



Summary

Accounts (Closed)

Collections

Inquiries

Public Records

Credit Score

SYNCB/QVC
604576XXXXXXXXXX

Closed

ACCOUNT DETAILS

Account Name	SYNCB/QVC
Account #	604576XXXXXXXXXX
Original Creditor	-
Company Sold	-
Account Type	REVOLVING
Date Opened	Oct 08, 2017
Account Status	Closed
Payment Status	Legally paid in full for less than the full balance
Status Updated	Apr 01, 2019
Balance	-
Balance Updated	Apr 08, 2019
Credit Limit	\$700
Monthly Payment	-
Past Due Amount	-
Highest Balance	-
Terms	Revolving
Responsibility	Individual
Your Statement	-
Comments	Election of remedy - reported by subscriber Account legally paid in full for less than the full balance

CREDIT USAGE



Unknown Credit Usage
Credit usage could not be calculated for this account because either the balance and/or credit limit were not reported.

CONTACT INFORMATION

PO BOX 965018
ORLANDO, FL 32896
(866) 367-9444

PAYMENT HISTORY

2019				2018				2017			
Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr	Jan	Feb	Mar	Apr
May	Jun	Jul	Aug	May	Jun	Jul	Aug	May	Jun	Jul	Aug
Sep	Oct	Nov	Dec	Sep	Oct	Nov	Dec	Sep	Oct	Nov	Dec

☐ OK
☐ 30 Days Late
☐ Negative
☐ Data Unavailable
☐ 120+ Days Late
☐ 60 Days Late
☐ 90 Days Late

Summary

Accounts (Closed)

Collections

Inquiries

Public Records

Credit Score

June 3, 2020

Equifax Information Services LLC
PO Box 740256
Atlanta, GA 30374

Krystian Louise Swinton
7718 Loma Vista Dr.
Kansas City, MO 64138
SS#: [REDACTED]
DOB: [REDACTED]

RE: **DISPUTE OF INACCURATE CREDIT REPORT INFORMATION**

Dear Sir/Madam:

I am writing to dispute inaccurate information you have placed in my credit report. Please refer to the credit report you generated on May 29, 2020, Confirmation [REDACTED]

In a nutshell, I filed for Chapter 7 Bankruptcy on October 21, 2019, case #19-42681-btf7, and received my discharge on January 29, 2020. Specifically, I dispute the following information reported:

[REDACTED]

The Synch/Old Navy account, #601859****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged, not "Over 120 Days Past Due" and remove any Charge Off Amount.

I look forward to your reply advising me that the inaccurate information has been fully corrected on my credit report.

Very truly yours,


Krystian Louise Swinton

Enclosures

#

#

Exhibit F

Card Rev 12/10/2012

IDENTITY NAME AND ANY AGENCY
LEFT UPON MY DEATH: ☐ SPECIALLY
☐ ANY OTHER

SIGNATURE OF DONOR: _____ DATE: _____

1ST WITNESS: _____ 2ND WITNESS: _____ MEDICAL ALERT: _____ BLOOD TYPE: _____

NAME OF LICENSEE'S ATTORNEY & FACT FOR HEALTH CARE
DECISION: _____

ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

ENDORSEMENTS:
None

CLASS:
Operator

RESTRICTIONS:
A-Corrective Lenses



This card belongs to the Social Security Administration and you must return it if we ask for it.

If you find a card that isn't yours, please return it to:
 Social Security Administration
 P.O. Box 33108, Baltimore, MD 21290-3008

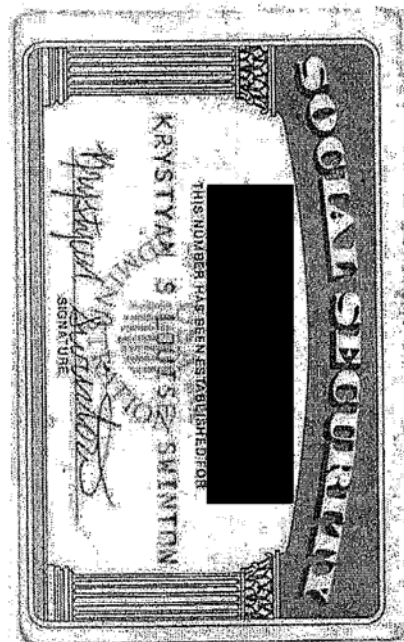
Improper use of this card or number by anyone is punishable by fine or imprisonment or both.

Protect Your Number and Card to Prevent Their Misuse:

- * Sign your card right away and keep it in a safe place.
- * DO NOT carry it with you.

For any other Social Security business information, contact your local Social Security office. If you write to the above address for any business other than returning a found card, it will take longer for us to answer your letter.

Social Security Administration
 Form SSA-1000 (12-2002)



19-42681-btf7 Krystian Louise Swinton**Case type:** bk **Chapter:** 7 **Asset:** No Vol: v **Bankruptcy Judge:** Brian T. Fenimore**Date filed:** 10/21/2019 **Date of last filing:** 05/01/2020**Debtor discharged:** 01/29/2020**Date terminated:** 05/01/2020

Case Summary

Office: Kansas City
County: JACKSON-
 MO

Fee: Paid
Origin: 0
Previous term:

Joint: n
Original chapter: 7
Current chapter: 7

Filed: 10/21/2019**Terminated:** 05/01/2020**Debtor discharged:** 01/29/2020**Reopened:****Converted:****Debtor dismissed:****Confirmation hearing:****Debtor disposition:** Standard Discharge**Nature of debt:** consumer**Pending status:** ,Case Closed,Discharge entered**Flags:** DEC, FMC, RND, CLOSED

Trustee: Janice E.
 Stanton

City: Kansas City **Phone:** 816-421-
 7770

Fax: 816-421-7773

Email: jstanton@sr-
 lawfirm.com

Party 1: Swinton, Krystian Louise (Debtor 1)
 SSN / ITIN: xxx-xx-4251

Atty: Tracy L.
 Robinson

Represents party 1: Debtor 1**Phone:** 816-842-1317**Fax:** 816-842-0315**Email:** admin@tlrlaw.com**Location of case files:****Volume:** CS1

The case file may not be available.

PACER Service Center			
Transaction Receipt			
06/04/2020 08:51:33			
PACER Login:	Tracy1125	Client Code:	
Description:	Case Summary	Search Criteria:	19-42681-btf7
Billable Pages:	1	Cost:	0.10

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.5

Midland Funding, LLC

Nonpriority Creditor's Name

2365 Northside Drive

Suite 300

San Diego, CA 92108

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 4653

\$1,910.87

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify 1916-CV15673

4.6

Nelnet

Nonpriority Creditor's Name

121 S 13th Street

Suite 201

Lincoln, NE 68508

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 5787

\$62,855.88

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

4.7

Synchrony Bank/Old Navy

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.8

Synchrony Bank/QCard

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 7898

\$961.52

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

4.9

Synchrony Bank/Walmart

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 1053

\$571.63

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Abbott, Osborn, Van Vliet, PLC

974 - 73rd Street

Suite 20

Des Moines, IA 50324

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

6838

Name and Address

Capital One

Inquiries/Bankruptcy Department

PO Box 30285

Salt Lake City, UT 84130-0285

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

0425

Name and Address

Capital One

PO Box 30281

Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

June 3, 2020

Experian
PO Box 4500
Allen, TX 75013

Krystian Louise Swinton
7718 Loma Vista Dr.
Kansas City, MO 64138
SS#: [REDACTED]
DOB: [REDACTED]

RE: DISPUTE OF INACCURATE CREDIT REPORT INFORMATION

Dear Sir/Madam:

I am writing to dispute inaccurate information you have placed in my credit report. In a nutshell, I filed for Chapter 7 Bankruptcy on October 21, 2019, case #19-42681-btf7, and received my discharge on January 29, 2020. Specifically, I dispute the following information reported:

The Synch/Old Navy account, #601859****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.

The Synch/QVC account, #604576****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.

Finally, please remove the following incorrect personal information:

Krystian S Swinton
7706 Loma Vista Dr, Kansas City, MO 64138

I look forward to your reply advising me that the inaccurate information has been fully corrected on my credit report.

Very truly yours,


Krystian Louise Swinton

Enclosures

#

#

Card Rev 12/18/2018

MISSOURI DEPARTMENT OF TRANSPORTATION
 GET UPON MY DEATH: ☐ SPECIALLY
☐ ANY ORGAN

SIGNATURE OF DONOR: _____ DATE: _____

1ST WITNESS: _____ 2ND WITNESS: _____ MEDICAL ALERT BLOOD TYPE: _____

NAME OF LICENSEE'S ATTORNEY IN FACT FOR HEALTH CARE DECISIONS: _____

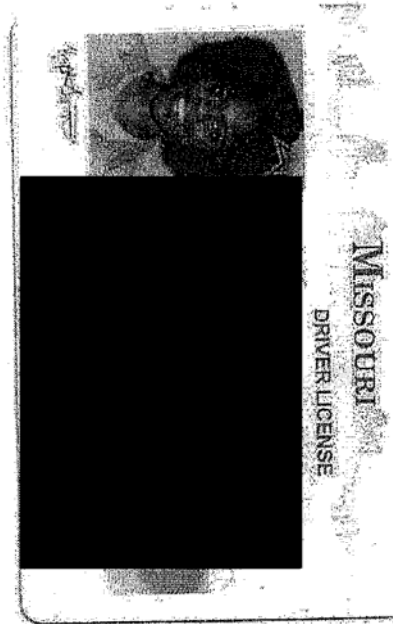
ADDRESS: _____

CITY: _____ ST: _____ ZIP: _____

ENDORSEMENTS:
None

CLASS:
Operator

RESTRICTIONS:
A-Corrective Lenses



This card belongs to the Social Security Administration and you must return it if we ask for it.

If you find a card that isn't yours, please return it to:

Social Security Administration
P.O. Box 38008, Baltimore, MD 21290-3808

Improper use of this card or number by anyone is punishable by fine, imprisonment or both.

Protect Your Number and Card to Prevent Their Misuse:

- Sign your card right away and keep it in a safe place.
- DO NOT carry it with you.

For any other Social Security business information, contact your local Social Security office. If you write to the above address for any business other than returning a found card, it will take longer for

Social Security Administration
Form SSA-3000 (12-2002)

SOCIAL SECURITY

OFFICE

KRISTYAN S LOUISE SWINTON

Kristy Swinton

SIGNATURE

19-42681-btf7 Krystian Louise Swinton**Case type:** bk **Chapter:** 7 **Asset:** No **Vol:** v **Bankruptcy Judge:** Brian T. Fenimore**Date filed:** 10/21/2019 **Date of last filing:** 05/01/2020**Debtor discharged:** 01/29/2020**Date terminated:** 05/01/2020

Case Summary

Office: Kansas City
County: JACKSON-
 MO

Fee: Paid
Origin: 0
Previous term:

Joint: n
Original chapter: 7
Current chapter: 7

Filed: 10/21/2019**Terminated:** 05/01/2020**Debtor discharged:** 01/29/2020**Reopened:****Converted:****Debtor dismissed:****Confirmation hearing:****Debtor disposition:** Standard Discharge**Nature of debt:** consumer**Pending status:** ,Case Closed,Discharge entered**Flags:** DEC, FMC, RND, CLOSED

Trustee: Janice E.
 Stanton

City: Kansas City **Phone:** 816-421-
 7770

Fax: 816-421-7773

Email: jstanton@sr-
 lawfirm.com

Party 1: Swinton, Krystian Louise (Debtor 1)
 SSN / ITIN: xxx-xx-4251

Atty: Tracy L.
 Robinson

Represents party 1: Debtor 1**Phone:** 816-842-1317**Fax:** 816-842-0315**Email:** admin@tlrlaw.com**Location of case files:****Volume:** CS1

The case file may not be available.

PACER Service Center			
Transaction Receipt			
06/04/2020 08:51:33			
PACER Login:	Tracy1125	Client Code:	
Description:	Case Summary	Search Criteria:	19-42681-btf7
Billable Pages:	1	Cost:	0.10

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.5

Midland Funding, LLC

Nonpriority Creditor's Name

2365 Northside Drive

Suite 300

San Diego, CA 92108

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 4653

\$1,910.87

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify 1916-CV15673

4.6

Nelnet

Nonpriority Creditor's Name

121 S 13th Street

Suite 201

Lincoln, NE 68508

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 5787

\$62,855.88

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

4.7

Synchrony Bank/Old Navy

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.8

Synchrony Bank/QCard

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 7898

\$961.52

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

4.9

Synchrony Bank/Walmart

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 1053

\$571.63

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

Abbott, Osborn, Van Vliet, PLC

974 - 73rd Street

Suite 20

Des Moines, IA 50324

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

6838

Name and Address

Capital One

Inquiries/Bankruptcy Department

PO Box 30285

Salt Lake City, UT 84130-0285

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

0425

Name and Address

Capital One

PO Box 30281

Salt Lake City, UT 84130

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.5 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims☒ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

June 3, 2020

Trans Union, LLC
Consumer Dispute Center
PO Box 2000
Chester, PA 19016

Krystian Louise Swinton
7718 Loma Vista Dr.
Kansas City, MO 64138
SS#: [REDACTED]
DOB [REDACTED]

RE: **DISPUTE OF INACCURATE CREDIT REPORT INFORMATION**

Dear Sir/Madam:

I am writing to dispute inaccurate information you have placed in my credit report. In a nutshell, I filed for Chapter 7 Bankruptcy on October 21, 2019, case #19-42681-btf7, and received my discharge on January 29, 2020. Specifically, I dispute the following information reported:

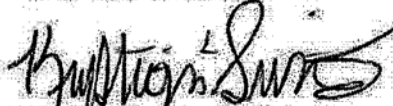


The Synch/Old Navy account, #601859****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.

The Synch/QVC account, #604576****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.

I look forward to your reply advising me that the inaccurate information has been fully corrected on my credit report.

Very truly yours,


Krystian Louise Swinton

Enclosures

#

MISSOURI DRIVER LICENSE

ENDORSEMENTS: None

CLASS: Operator

RESTRICTIONS: A-Corrective Lenses

EXPIRATION DATE: 12/10/2012

ISSUANCE DATE: 12/10/2012

DATE OF BIRTH: 12/10/2012

SEX: M

HEIGHT: 5'10"

WEIGHT: 170

HAIR: BRN

EYES: BRN

SKIN: FLESH

SIGNATURE OF HOLDER: [Redacted]

DATE: 12/10/2012

1ST WITNESS: [Redacted]

2ND WITNESS: [Redacted]

MEDICAL ALERT: [Redacted]

BLOOD TYPE: [Redacted]

NAME OF LICENSEE'S ATTORNEY IN FACT FOR REALTY CASE: [Redacted]

ADDRESS: [Redacted]

CITY: [Redacted]

STATE: MO

ZIP: 63101



This card belongs to the Social Security Administration and you must return it if we ask for it.

If you find a card that isn't yours, please return it to:
Social Security Administration

P.O. Box 38008, Baltimore, MD 21208-0008

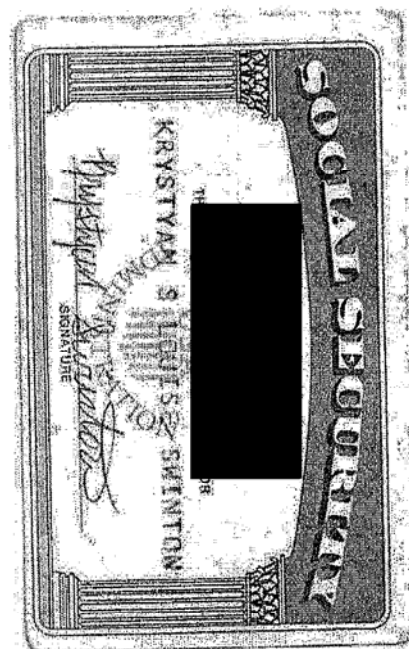
Improper use of this card or number by anyone is punishable by fine, imprisonment or both.

Protect Your Number and Card to Prevent Their Misuse:

- Sign your card right away and keep it in a safe place.
- DO NOT carry it with you.

For any other Social Security business information, contact your local Social Security office. If you write to the above address for any business other than returning a hand card, it will take longer for us to answer your letter.

Social Security Administration
Form SSA-3000 (12-2002)



19-42681-btf7 Krystian Louise Swinton**Case type:** bk **Chapter:** 7 **Asset:** No Vol: v **Bankruptcy Judge:** Brian T. Fenimore**Date filed:** 10/21/2019 **Date of last filing:** 05/01/2020**Debtor discharged:** 01/29/2020**Date terminated:** 05/01/2020

Case Summary

Office: Kansas City
County: JACKSON-MO

Fee: Paid

Origin: 0

Previous term:

Joint: n

Original chapter: 7

Current chapter: 7

Filed: 10/21/2019

Terminated: 05/01/2020

Debtor discharged: 01/29/2020

Reopened:

Converted:

Debtor dismissed:

Confirmation hearing:

Debtor disposition: Standard Discharge

Nature of debt: consumer

Pending status: ,Case Closed,Discharge entered

Flags: DEC, FMC, RND, CLOSED

Trustee: Janice E. Stanton

City: Kansas City **Phone:** 816-421-7770 **Fax:** 816-421-7773

Email: jstanton@sr-lawfirm.com

Party 1: Swinton, Krystian Louise (Debtor 1)
 SSN / ITIN: xxx-xx-4251

Atty: Tracy L. Robinson

Represents party 1: Debtor 1

Phone: 816-842-1317

Fax: 816-842-0315

Email: admin@tlrlaw.com

Location of case files:

Volume: CS1

The case file may not be available.

PACER Service Center			
Transaction Receipt			
06/04/2020 08:51:33			
PACER Login:	Tracy1125	Client Code:	
Description:	Case Summary	Search Criteria:	19-42681-btf7
Billable Pages:	1	Cost:	0.10

Debtor 1 Krystian Louise Swinton

Case number (if known) _____

4.5

Midland Funding, LLC

Nonpriority Creditor's Name

2365 Northside Drive

Suite 300

San Diego, CA 92108

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 4653

\$1,910.87

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify 1916-CV15673

4.6

Nelnet

Nonpriority Creditor's Name

121 S 13th Street

Suite 201

Lincoln, NE 68508

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 5787

\$62,855.88

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify _____

4.7

Synchrony Bank/Old Navy

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify _____

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.8 Synchrony Bank/QCard Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7898</u> <u>\$961.52</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
---	--

4.9 Synchrony Bank/Walmart Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1053</u> <u>\$571.63</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
---	--

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Abbott, Osborn, Van Vliet, PLC 974 - 73rd Street Suite 20 Des Moines, IA 50324	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number	<u>6838</u>
---------------------------------	-------------

Name and Address Capital One Inquiries/Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number	<u>0425</u>
---------------------------------	-------------

Name and Address Capital One PO Box 30281 Salt Lake City, UT 84130	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number	
---------------------------------	--

Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
------------------	--

August 18, 2020

Equifax Information Services LLC
PO Box 740256
Atlanta, GA 30374

Krystian Louise Swinton
7718 Loma Vista Dr.
Kansas City, MO 64138
SS# [REDACTED]
DOB [REDACTED]

RE: **DISPUTE OF INACCURATE CREDIT REPORT INFORMATION – 2ND DISPUTE**

Dear Sir/Madam:

On June 3, 2020, I disputed inaccurate information you placed in my credit report and I never received a response. I am writing **AGAIN** to dispute the inaccurate information. Please refer to the credit report you generated on May 29, 2020, Confirmation [REDACTED]

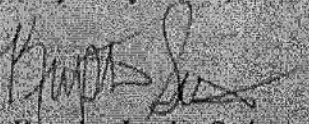
In a nutshell, I filed for Chapter 7 Bankruptcy on October 21, 2019, case #19-42681-btf7, and received my discharge on January 29, 2020. Specifically, I dispute the following information reported:

[REDACTED]

The Synco/Old Navy account, #601859****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged, not "Over 120 Days Past Due" and remove any Charge Off Amount.

I look forward to your reply advising me that the inaccurate information has been fully corrected on my credit report. **Again, this is the SECOND Dispute to correct these errors.**

Very Truly Yours,


Krystian Louise Swinton

Enclosures

Exhibit G

1005022719016101016

MISSOURI
CLASS:
Operator

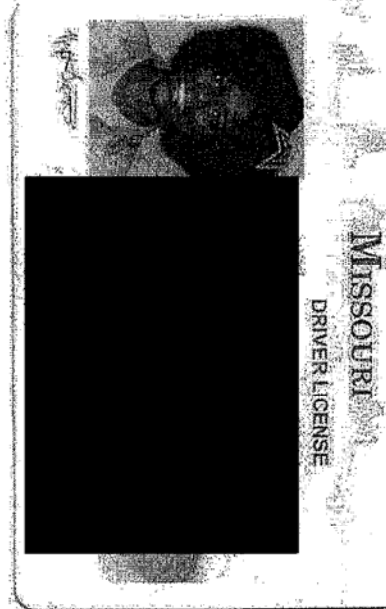
ENDORSEMENTS:
None

RESTRICTIONS:
A-Corrective Lenses

Card Rev 12/07/2012

☐ I HEREBY MAKE AN ANATOMICAL
 GIFT UPON MY DEATH: ☐ ANY ORGAN ☐ SPECIFICALLY:
 SIGNATURE OF DONOR: _____ DATE: _____

1ST WITNESS	2ND WITNESS	MEDICAL ALERT	BLOOD TYPE
NAME OF LICENSEE'S ATTORNEY IN FACT FOR HEALTH CARE DECISIONS	ADDRESS		
CITY			ST. ZIP



This card belongs to the Social Security Administration and you must return it if we ask for it.

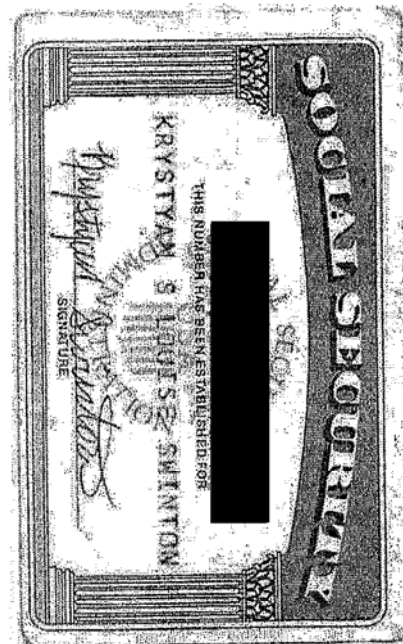
If you find a card that has yours, please return it to:
Social Security Administration
P.O. Box 13408, Baltimore, MD 21290-3008

Improper use of this card or number by anyone is punishable by fine, imprisonment or both.

Protect Your Number and Card to Prevent Their Misuse!
* Sign your card right away and keep it in a safe place.
* DO NOT carry it with you.

For any other Social Security business information, contact your local Social Security office. If you write to the above address for any business other than returning a found card, it will take longer for us to answer your letter.

Social Security Administration
Form SSA-3000 (12-2002)



19-42681-btf7 Krystian Louise Swinton**Case type:** bk **Chapter:** 7 **Asset:** No Vol: v **Bankruptcy Judge:** Brian T. Fenimore**Date filed:** 10/21/2019 **Date of last filing:** 05/01/2020**Debtor discharged:** 01/29/2020**Date terminated:** 05/01/2020

Case Summary

Office: Kansas City
County: JACKSON-
 MO

Fee: Paid
Origin: 0
Previous term:

Joint: n
Original chapter: 7
Current chapter: 7

Filed: 10/21/2019**Terminated:** 05/01/2020**Debtor discharged:** 01/29/2020**Reopened:****Converted:****Debtor dismissed:****Confirmation hearing:****Debtor disposition:** Standard Discharge**Nature of debt:** consumer**Pending status:** ,Case Closed,Discharge entered**Flags:** DEC, FMC, RND, CLOSED

Trustee: Janice E.
 Stanton

City: Kansas City **Phone:** 816-421-
 7770 **Fax:** 816-421-7773

Email: jstanton@sr-
 lawfirm.com

Party 1: Swinton, Krystian Louise (Debtor 1)
 SSN / ITIN: xxx-xx-4251

Atty: Tracy L.
 Robinson

Represents party 1: Debtor 1**Phone:** 816-842-1317**Fax:** 816-842-0315**Email:** admin@tlrlaw.com**Location of case files:****Volume:** CS1

The case file may not be available.

PACER Service Center			
Transaction Receipt			
06/04/2020 08:51:33			
PACER Login:	Tracy1125	Client Code:	
Description:	Case Summary	Search Criteria:	19-42681-btf7
Billable Pages:	1	Cost:	0.10

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.5

Midland Funding, LLC

Nonpriority Creditor's Name

2365 Northside Drive

Suite 300

San Diego, CA 92108

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 4653

\$1,910.87

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify 1916-CV15673

4.6

Nelnet

Nonpriority Creditor's Name

121 S 13th Street

Suite 201

Lincoln, NE 68508

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number 5787

\$62,855.88

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify

4.7

Synchrony Bank/Old Navy

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number

Unknown

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.8 Synchrony Bank/QCard Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7898</u> <u>\$961.52</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
---	--

4.9 Synchrony Bank/Walmart Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1053</u> <u>\$571.63</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
---	--

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Abbott, Osborn, Van Vliet, PLC 974 - 73rd Street Suite 20 Des Moines, IA 50324	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number 6838

Name and Address Capital One Inquiries/Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number 0425

Name and Address Capital One PO Box 30281 Salt Lake City, UT 84130	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number

Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
------------------	--

August 18, 2020

Experian
PO Box 4500
Allen, TX 75013

Krystian Louise Swinton
7718 Loma Vista Dr.
Kansas City, MO 64138
SS# [REDACTED]
DOB [REDACTED]

RE: **DISPUTE OF INACCURATE CREDIT REPORT INFORMATION – 2ND DISPUTE**

Dear Sir/Madam:

On June 3, 2020, I disputed inaccurate information you placed in my credit report and I never received a response. I am writing **AGAIN** to dispute the inaccurate information.

In a nutshell, I filed for Chapter 7 Bankruptcy on October 21, 2019, case #19-42681-btf7, and received my discharge on January 29, 2020. Specifically, I dispute the following information reported:

The Synch/Old Navy account, #601859****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.

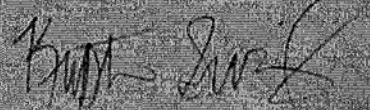
The Synch/QVC account, #604576****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.

Finally, please remove the following incorrect personal information:


Krystian S Swinton
7706 Loma Vista Dr, Kansas City, MO 64138

I look forward to your reply advising me that the inaccurate information has been fully corrected on my credit report. **Again, this is the SECOND Dispute to correct these errors.**

Very Truly Yours,


Krystian Louise Swinton

Enclosures




CLASS:
F-Operator

Card RCV 12/07/2012

EVERYONE MUST TAKE AN ALCOHOL TEST UPON RECEIVING A LICENSE

☐ SPECIFICALLY
☐ ANY OTHER

EXPIRATION OF LICENSE	DATE	
1ST WITNESS	2ND WITNESS	3RD WITNESS
NAME OF LICENSEE'S ATTORNEY IN FACT FOR HEALTH CARE DECISIONS		
ADDRESS		
CITY		



CLASS:
F-Operator

Card RCV 12/07/2012

EVERYONE MUST TAKE AN ALCOHOL TEST UPON RECEIVING A LICENSE

☐ SPECIFICALLY
☐ ANY OTHER

EXPIRATION OF LICENSE	DATE	
1ST WITNESS	2ND WITNESS	3RD WITNESS
NAME OF LICENSEE'S ATTORNEY IN FACT FOR HEALTH CARE DECISIONS		
ADDRESS		
CITY		

This card belongs to the Social Security Administration and you must return it if we ask for it.

If you find a card that isn't yours, please return it to:
 Social Security Administration
 P.O. Box 33008, Baltimore, MD 21290-3008

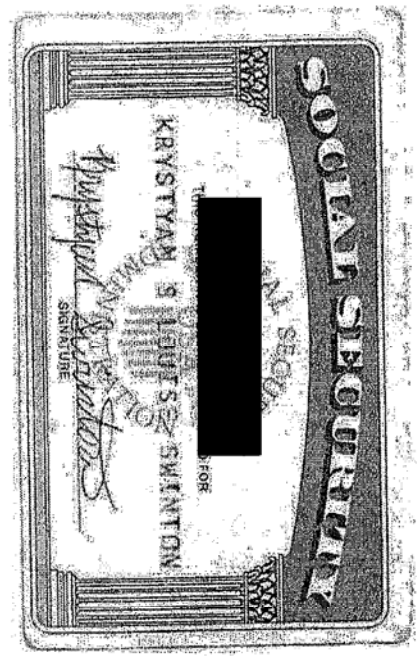
Improper use of this card or number by anyone is punishable by fine, imprisonment or both.

Protect Your Number and Card to Prevent Their Misuse:

- Sign your card right away and keep it in a safe place.
- DO NOT carry it with you.

For any other Social Security business information, contact your local Social Security office. If you write to the above address for any business other than returning a found card, it will take longer for us to answer your letter.

Social Security Administration
 Form SSA-3000 (12-2002)



19-42681-btf7 Krystian Louise Swinton**Case type:** bk **Chapter:** 7 **Asset:** No **Vol:** v **Bankruptcy Judge:** Brian T. Fenimore**Date filed:** 10/21/2019 **Date of last filing:** 05/01/2020**Debtor discharged:** 01/29/2020**Date terminated:** 05/01/2020

Case Summary

Office: Kansas City
County: JACKSON-MO

Fee: Paid
Origin: 0
Previous term:

Joint: n
Original chapter: 7
Current chapter: 7

Filed: 10/21/2019**Terminated:** 05/01/2020**Debtor discharged:** 01/29/2020**Reopened:****Converted:****Debtor dismissed:****Confirmation hearing:****Debtor disposition:** Standard Discharge**Nature of debt:** consumer**Pending status:** ,Case Closed,Discharge entered**Flags:** DEC, FMC, RND, CLOSED

Trustee: Janice E. Stanton

City: Kansas City **Phone:** 816-421-7770 **Fax:** 816-421-7773

Email: jstanton@sr-lawfirm.com

Party 1: Swinton, Krystian Louise (Debtor 1)
 SSN / ITIN: xxx-xx-4251

Atty: Tracy L. Robinson

Represents party 1: Debtor 1**Phone:** 816-842-1317**Fax:** 816-842-0315**Email:** admin@tlrlaw.com**Location of case files:****Volume:** CS1

The case file may not be available.

PACER Service Center			
Transaction Receipt			
06/04/2020 08:51:33			
PACER Login:	Tracy1125	Client Code:	
Description:	Case Summary	Search Criteria:	19-42681-btf7
Billable Pages:	1	Cost:	0.10

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.5 Midland Funding, LLC Nonpriority Creditor's Name 2365 Northside Drive Suite 300 San Diego, CA 92108 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>4653</u> <u>\$1,910.87</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>1916-CV15673</u>
---	--

4.6 Nelnet Nonpriority Creditor's Name 121 S 13th Street Suite 201 Lincoln, NE 68508 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>5787</u> <u>\$62,855.88</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input checked="" type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____
--	---

4.7 Synchrony Bank/Old Navy Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number _____ <u>Unknown</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
--	---

Debtor 1 Krystian Louise Swinton

Case number (if known)

4.8 Synchrony Bank/QCard Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7898</u> <u>\$961.52</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
---	---

4.9 Synchrony Bank/Walmart Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1053</u> <u>\$571.63</u> When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
---	---

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Abbott, Osborn, Van Vliet, PLC 974 - 73rd Street Suite 20 Des Moines, IA 50324	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number 6838

Name and Address Capital One Inquiries/Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number 0425

Name and Address Capital One PO Box 30281 Salt Lake City, UT 84130	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
---	---

Last 4 digits of account number

Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
------------------	--

August 18, 2020

Trans Union, LLC
Consumer Dispute Center
PO Box 2000
Chester, PA 19016

Krystian Louise Swinton
7718 Loma Vista Dr.
Kansas City, MO 64138
SS# [REDACTED]
DOB [REDACTED]

RE: **DISPUTE OF INACCURATE CREDIT REPORT INFORMATION - 2ND**
DISPUTE

Dear Sir/Madam:

On June 3, 2020, I disputed inaccurate information you placed in my credit report and I never received a response. I am writing **AGAIN** to dispute the inaccurate information.

In a nutshell, I filed for Chapter 7 Bankruptcy on October 21, 2019, case #19-42681-btf7, and received my discharge on January 29, 2020. Specifically, I dispute the following information reported:


[REDACTED]

The Synch/Old Navy account, #601859****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.


The Synch/QVC account, #604576****, was DISCHARGED through my Chapter 7 bankruptcy. Please update the Status to show Discharged and remove any Charge Off Amount.

I look forward to your reply advising me that the inaccurate information has been fully corrected on my credit report. **Again, this is the SECOND Dispute to correct these errors.**

Very Truly Yours,


Krystian Louise Swinton

Enclosures



CLASS:
F-Operator

ENDORSEMENTS:
None

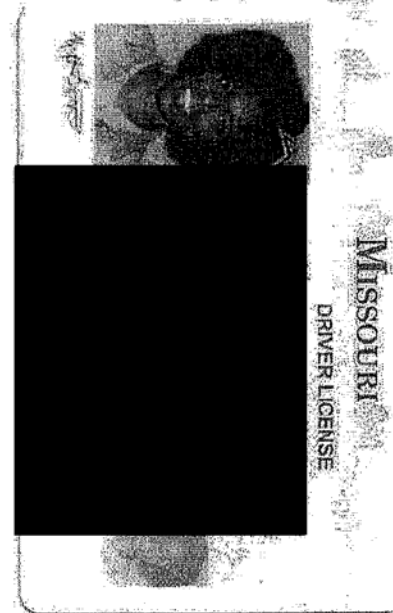
RESTRICTIONS:
A-Corrective Lenses

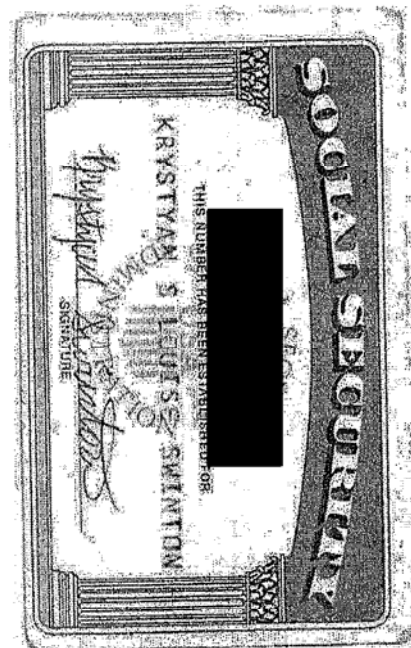
Card Rev 12/18/2012

☐ SPECIALTY:
☐ ANY ORGAN:
☐ SPECIALTY:
☐ ANY ORGAN:

SIGNATURE OF DOCTOR: _____ DATE: _____

1ST WITNESS	2ND WITNESS	MEDICAL ALERT	BLOOD TYPE
SIGNATURE OF LICENSEE'S ATTORNEY (IF FACT FOR NEGLIGENCE DISCLOSED)			
ADDRESS			
CITY		ST	ZIP





This card belongs to the Social Security Administration and you must return it if we ask for it.

If you find a card that isn't yours, please return it to:

Social Security Administration
P.O. Box 38008, Baltimore, MD 21290-3808

Improper use of this card or number by anyone is punishable by fine, imprisonment or both.

Protect Your Number and Card to Prevent Their Misuse:

- Start your card right away and keep it in a safe place.
- DO NOT carry it with you.

For any other Social Security business information, contact your local Social Security office. If you write to the above address for any business other than returning a found card, it will take longer for us to answer your letter.

Social Security Administration
Form SSA-3000 (12-2002)

19-42681-btf7 Krystian Louise Swinton**Case type:** bk **Chapter:** 7 **Asset:** No Vol: v **Bankruptcy Judge:** Brian T. Fenimore**Date filed:** 10/21/2019 **Date of last filing:** 05/01/2020**Debtor discharged:** 01/29/2020**Date terminated:** 05/01/2020

Case Summary

Office: Kansas City
County: JACKSON-
 MO

Fee: Paid**Origin:** 0**Previous term:****Joint:** n**Original chapter:** 7**Current chapter:** 7**Filed:** 10/21/2019**Terminated:** 05/01/2020**Debtor discharged:** 01/29/2020**Reopened:****Converted:****Debtor dismissed:****Confirmation hearing:****Debtor disposition:** Standard Discharge**Nature of debt:** consumer**Pending status:** ,Case Closed,Discharge entered**Flags:** DEC, FMC, RND, CLOSED

Trustee: Janice E.
 Stanton

City: Kansas City
 7770

Phone: 816-421-**Fax:** 816-421-7773

Email: jstanton@sr-
 lawfirm.com

Party 1: Swinton, Krystian Louise (Debtor 1)

SSN / ITIN: xxx-xx-4251

Atty: Tracy L.
 Robinson

Represents party 1: Debtor 1**Phone:** 816-842-1317**Fax:** 816-842-0315**Email:** admin@tlrlaw.com**Location of case files:****Volume:** CS1

The case file may not be available.

PACER Service Center			
Transaction Receipt			
06/04/2020 08:51:33			
PACER Login:	Tracy1125	Client Code:	
Description:	Case Summary	Search Criteria:	19-42681-btf7
Billable Pages:	1	Cost:	0.10

Debtor 1 Krystian Louise Swinton

Case number (if known) _____

4.5

Midland Funding, LLC

Nonpriority Creditor's Name

2365 Northside Drive

Suite 300

San Diego, CA 92108

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 4653\$1,910.87

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify 1916-CV15673

4.6

Nelnet

Nonpriority Creditor's Name

121 S 13th Street

Suite 201

Lincoln, NE 68508

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ YesLast 4 digits of account number 5787\$62,855.88

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☒ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify _____

4.7

Synchrony Bank/Old Navy

Nonpriority Creditor's Name

Attn: Bankruptcy Department

PO Box 965060

Orlando, FL 32896-5060

Number Street City State Zip Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☒ No☐ Yes

Last 4 digits of account number _____

Unknown

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify _____

Debtor 1 Krystian Louise Swinton

Case number (if known) _____

4.8 Synchrony Bank/QCard Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check If this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>7898</u> \$961.52 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
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4.9 Synchrony Bank/Walmart Nonpriority Creditor's Name Attn: Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check If this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number <u>1053</u> \$571.63 When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
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Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address Abbott, Osborn, Van Vliet, PLC 974 - 73rd Street Suite 20 Des Moines, IA 50324	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>6838</u>
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Name and Address Capital One Inquiries/Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130-0285	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number <u>0425</u>
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Name and Address Capital One PO Box 30281 Salt Lake City, UT 84130	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.5</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number _____
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Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
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>>> We have researched the credit account. Account # - 601859644673. The results are: We have verified that this item has been reported correctly. Additional information has been provided from the original source regarding this item: THE FOLLOWING FIELDS HAVE BEEN MODIFIED: *ADDITIONAL INFORMATION *ACCOUNT HISTORY. If you have additional questions about this item please contact: Synch/Old Navy, PO Box 965036, Orlando FL 32896-5036 Phone: (866) 396-8254

Synch/Old Navy PO Box 965036 Orlando FL 32896-5036: (866) 396-8254

Account Number	Date Opened	High Credit	Credit Limit	Term Duration	Term Frequency	Months Rec'd	Activity Designator	Credit Classification			
601859644673	05/07/2017	\$422	\$200		Monthly	13	Paid and Closed				
Balance	Amount	Date of Last Payment	Actual Payment Amount	Scheduled Payment Amount	Date of 1st Delinquency	Date of Last Activity	Date of Charge Off	Delinquent Pay Start Date	Delinquent Pay Amount	Delinquent Pay Date	Date Closed
09/11/2020	\$0	05/2018	\$0	\$0		05/2018			\$0		12/2017
Status	Type of Account	Type of Loan	Charge Account	Individual Account	Portfolio Indicator	Portfolio Status					
Pays As Agreed	Revolving	Charge Account	Individual Account								

ADDITIONAL INFORMATION:

ADDITIONAL INFORMATION:

Account Paid For Less Than Full Balance

Closed or Paid Account/Zero Balance

Charge

Account History with Status Codes

	05/2018	04/2018	03/2018	02/2018	01/2018	12/2017	11/2017
5	4	5	4	3	2	1	

(End Of Report)

SYNCB/OLD NAVY Partial Acct # 601859644573 PO BOX 985005 ORLANDO FL 32895 (877) 222 8868

Date opened May 2017	First reported May 2017	Recent balance Not reported	Payment history
Type Charge Card	Terms Not reported	Status Paid in settlement.	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
Responsibility Individual	Monthly payment Not reported	Comment: This account is scheduled to continue on record until Jul 2024.	2018 [X] [X] [X] [X] [X] [CLS]
	Credit limit or original amount \$200	Date of Status Jun 2018	2017 [X] [X] [X] [X] [X] [X] [X] [X] [X] [X] [X] [X]
	High balance \$422		

SYNCB/QVC Partial Acct # 604576102625 PO BOX 985018 ORLANDO FL 32896 (877) 490 1787

Date opened Oct 2017	First reported Oct 2017	Recent balance Not reported	Payment history
Type Charge Card	Terms Not reported	Status Paid in settlement. \$961	Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec
Responsibility Individual	Monthly payment Not reported	Comment: This account is scheduled to continue on record until Feb 2025.	2019 [ND] [CO] [CO]
	Credit limit or original amount \$700	Date of Status Mar 2019	2018 [X] [X] [X] [X] [X] [X] [X] [X] [X] [X] [X] [X]
	High balance \$961		2017 [X] [X] [X] [X] [X] [X] [X] [X] [X] [X] [X] [X]

File Number:
Date Issued:

09/16/2020

Page 4 of 6

Your Investigation Results

INVESTIGATION RESULTS - DISPUTED INFORMATION UPDATED: A change was made to the item(s) based on your dispute.

SYNCB/OLD NAVY #601859644673**** (PO BOX 965005, ORLANDO, FL 32896-5005, (877) 222-6868)

We investigated the information you disputed and updated: **Balance; Past Due; Pay Status; Terms; Remarks; Rating; Payment Received.** Here is how this item appears on your credit report following our investigation.

Date Opened:	05/07/2017	Date Updated:	06/17/2018	Pay Status:	>Account Included in
Responsibility:	Individual Account	Last Payment Made:	05/30/2018		Bankruptcy<
Account Type:	Revolving Account	High Balance:	\$422	Date Closed:	12/11/2017
Loan Type:	CHARGE ACCOUNT	Credit Limit:	\$200	Date Paid:	05/30/2018

Remarks: >CHAPTER 7 BANKRUPTCY< CLOSED
Estimated month and year that this item will be removed: 09/2024

SYNCB/QVC #604576102825**** (PO BOX 965005, ORLANDO, FL 32896, (877) 490-1787)

We investigated the information you disputed and updated: **Rating.** Here is how this item appears on your credit report following our investigation.

Date Opened:	10/08/2017	Date Updated:	04/08/2019	Pay Status:	>Account Included in
Responsibility:	Individual Account	Last Payment Made:	03/04/2019		Bankruptcy<
Account Type:	Revolving Account	High Balance:	\$961	Date Closed:	02/02/2018
Loan Type:	CHARGE ACCOUNT	Credit Limit:	\$700	Date Paid:	03/04/2019

Remarks: >CHAPTER 7 BANKRUPTCY<
Estimated month and year that this item will be removed: 05/2025